



Communicable Disease and Epidemiology News

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Public Health

Seattle & King County

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

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Smallpox Vaccine (Vaccinia) Adverse Event Recognition and Management

Military bases and U.S. Coast Guard facilities in our region are beginning to vaccinate small numbers of personnel for smallpox. It is possible, though unlikely, that persons with adverse events related to smallpox vaccination, including secondary vaccinia virus infection, will present to health care providers in the community for evaluation and care. Civilian Smallpox Health Care and Public Health Teams are scheduled to begin receiving immunizations in February, and the current National Smallpox Vaccination Plan (NSVP) calls for a progressive increase in the number of persons vaccinated in the community this year. Therefore, health care providers should become familiar with the recognition, evaluation, and management of adverse events related to smallpox vaccination, including those occurring in close contacts of vaccinees due to secondary spread (see training resources, below). Health care providers should also know how to contact infectious disease, dermatology, and immunology specialists for assistance in evaluating persons with possible smallpox vaccine adverse events. Please also contact Public Health's Communicable Disease Control, Epidemiology, and Immunization Section at (206) 296-4774 when evaluating vaccinees, or contacts of vaccinees suspected to have complications of smallpox vaccination.

Please look for Centers for Disease Control and Prevention's NEW Clinical Management of Adverse Events Following Smallpox Vaccination (to be available Feb 4, 2003) at:
<http://www.bt.cdc.gov/agent/smallpox/training/webcast/04feb2003/index.asp>

Excellent information on smallpox vaccine adverse event recognition and management can be found at:
<http://www.bt.cdc.gov/training/smallpoxvaccine/reactions/default.htm>

Additional valuable information about smallpox is available at:
<http://www.bt.cdc.gov/agent/smallpox/index.asp>

The CDC smallpox "resource kit" for health care providers is available at:

<http://www.bt.cdc.gov/agent/smallpox/reference/resource-kit.asp>

Information and links to the above resources and others are available at the Public Health smallpox website: <http://www.metrokc.gov/health/bioterrorism/smallpox/>

Update on TB Outbreak Among Homeless

An increase of tuberculosis among homeless persons in King County was described in the November 2002 *Epi-Log*. Twenty-nine cases of tuberculosis were diagnosed in 2002, a doubling of the usual 12 to 15 cases per year diagnosed in King County. All culture-positive cases in the homeless (tested to date) are fully sensitive to standard TB medications. Twelve of these cases have the same DNA fingerprint, demonstrating a discrete outbreak that appears to account for the increase in cases among the homeless. A high proportion of the outbreak cases are Native American and/or HIV-infected.

Public Health-Seattle & King County's TB control program is being assisted by the Washington State Department of Health TB control program and the CDC to investigate and manage this outbreak. CDC staff have been instrumental in helping to evaluate potential sites of transmission and the magnitude of TB exposure at these sites.

Please maintain a high level of vigilance for signs and symptoms of tuberculosis among patients, especially the homeless, and call the TB program at (206) 731-4579 to report suspected new active cases. The TB Clinic's website contains useful information on TB infection and disease, reports describing local TB epidemiology, and links to other authoritative TB resources:
http://www.metrokc.gov/health/sts_svs/tuberculosis.htm

Increase in *Salmonella* Enteritidis in Washington State

Since mid-December, more than two dozen *Salmonella* Enteritidis cases have been reported in Washington State. Many of the isolates are indistinguishable by Pulsed Field Gel Electrophoresis (PFGE) indicating they may be related to a common source. The majority of cases are in residents of King and Snohomish Counties and most of the cases ate eggs during their incubation period. Symptoms of salmonella infection include sudden onset of diarrhea, abdominal cramps, usually fever, and sometimes vomiting. To help with this ongoing investigation, please obtain stool specimens for bacterial testing from persons with symptoms compatible with salmonellosis, and report any suspected or confirmed cases to public health as soon as possible. Persons at high risk for serious complications of salmonella infection include the very young, the elderly, and persons with compromised immune systems. Such persons should be particularly careful not to consume foods containing raw eggs (such as Caesar salad dressing, raw cookie dough) and should consume only egg dishes which are completely cooked. Information on salmonellosis is available online at: <http://www.metrokc.gov/health/prevcont/salmon.htm>

Sporadic influenza A activity in Washington State

Influenza is present, activity remains relatively quiet to-date. Both influenza A H1 strains and H3N2 strains have been reported by the Public Health laboratory. Both strains are represented in this year’s flu vaccine. Since the peak of the influenza season is still to come, there is still time to vaccinate high-risk individuals and their household members, health care workers, and others who wish to avoid influenza this season.

Guillain-Barré Syndrome Investigation

Public Health is investigating four recent cases of Guillain-Barré Syndrome. Two of the cases experienced a respiratory illness shortly before onset of Guillain-Barre Syndrome; no other common risk factor has been present. We are soliciting reports of Guillian-Barré Syndrome from health care providers in King County at this time to determine if there are additional cases occurring. Please call Laurie Stewart at (206) 296-2735 to report any recent cases of Guillain-Barré Syndrome. It would be helpful if you could provide information on recent illnesses, vaccinations, or travel among the cases.

Register for CDC’s Epidemiology & Vaccine-Preventable Diseases Course 2003

Registration information for the course: *Epidemiology and Prevention of Vaccine-Preventable Diseases*, is now available at: <http://www.metrokc.gov/health/immunization/providers.htm#training>
This training is scheduled for February 13, 20, 27, and March 6, 2003 and is being co-sponsored by the Region X Public Health Service. It will be held at the Blanchard Plaza Building, at 6th and Blanchard in downtown Seattle. Each interactive broadcast will run from 9:00 AM to 12:30 PM. If you have additional questions about this course, please contact Tiffany Acayan at (206) 205-5812 or tiffany.acayan@metrokc.gov.

Disease Reporting
AIDS/HIV (206) 296-4645
STDs..... (206) 731-3954
TB (206) 731-4579
Other Communicable Diseases..... (206) 296-4774
Automated 24-hr reporting line
for conditions not immediately
notifiable (206) 296-4782
Hotlines:
Communicable Disease..... (206) 296-4949
HIV/STD (206) 205-STD5
EPI-LOG Online (including past issues):
www.metrokc.gov/health/providers

Reported Cases of Selected Diseases, Seattle & King County 2002				
	Cases Reported in December		Cases Reported Through December	
	2002	2001	2002	2001
AIDS	23	37	277	327
Campylobacteriosis	16	27	300	325
Cryptosporidiosis	6	3	34	29
Chlamydial infections	429	349	4465	4297
Enterohemorrhagic <i>E. coli</i> (non-O157)	0	1	0	4
<i>E. coli</i> O157: H7	5	1	32	32
Giardiasis	5	11	171	150
Gonorrhea	127	111	1461	1555
<i>Haemophilus influenzae</i> (cases <6 years of age)	0	1	0	0
Hepatitis A	3	3	31	28
Hepatitis B (acute)	1	5	31	36
Hepatitis B (chronic)	63	46	585	629
Hepatitis C (acute)	0	0	12	9
Hepatitis C (chronic, confirmed/probable)	119	114	1458	1431
Hepatitis C (chronic, possible)	35	22	470	528
Herpes, genital (primary)	39	35	650	672
Measles	0	0	0	12
Meningococcal Disease	4	21	2	13
Mumps	0	0	0	1
Pertussis	15	154	0	39
Rubella	0	2	1	1
Rubella, congenital	0	0	0	1
Salmonellosis	16	13	212	260
Shigellosis	14	5	86	111
Syphilis	5	5	42	61
Syphilis, congenital	0	0	0	0
Syphilis, late	3	12	36	55
Tuberculosis	17	21	158	139

The *Epi-Log* is available in alternate formats upon request.